SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:						PAGE	3	38	OF		76
(c	(check only one)										
	×	11a		11b		11c		12			
		13		14		15		16			17

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or for commercial purposes, other than using th	ne name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) THE AMERICAN CONGRESS	OF OB-GYNS PAC (OB-GYN PAC	C)				
Full Name (Last, First, Middle Initial) MATTHEW LINDEMANN Mailing Address 18712 SNOWY PLOVER CII	Date of Receipt					
City	State Zip Code AK 99516	Transaction ID : SA11AI.17848				
ANCHORAGE	ZIV 99010	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	300.00				
Name of Employer	Occupation					
DENALI OB/GYN	PHYSICIAN					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	300.00					
Full Name (Last, First, Middle Initial) MARC A. LUCKETT	Date of Receipt					
Mailing Address 3911 21ST STREET		M M / D D / Y Y Y Y				
City	State Zip Code	09 05 2014 Transaction ID : \$A11A117728				
LEAVENWORTH	KS 66048	Transaction ID : SA11AI.17728 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer	Occupation					
ST. LUKE'S MEDICAL GROUP	PHYSICIAN					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00					
Full Name (Last, First, Middle Initial) JANEY E. MAKI	Date of Receipt					
	failing Address 13401 EAST MAINSGATE STREET					
City	State Zip Code	Transaction ID : SA11AI.18119				
WICHITA	KS 67228	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	175.00				
Name of Employer	Occupation					
VIA CHRISTI CLINIC	PHYSICIAN					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	425.00					
SUBTOTAL of Receipts This Page (optional)	725.00					
TOTAL This Period (last page this line number	r only)					